

# **EXHIBIT 19**



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**OLD REPUBLIC INSURANCE COMPANY**

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**BUSINESS AUTO**

**INSURANCE POLICY**

Policyholder Issuing and Servicing Office:

Old Republic Risk Management, Inc.  
445 South Moorland Road, Suite 300  
Brookfield, WI 53005  
Tel: (877) 797-3400  
Fax: (262) 797-0486



**OLD REPUBLIC INSURANCE GROUP**

J-01 (01/16)

INSURANCE IS PROVIDED BY  
THE COMPANY DESIGNATED ON THE DECLARATION PAGE

**IN WITNESS WHEREOF**, we have caused this policy to be executed and attested, and, if required by state law, this policy shall not be valid unless countersigned by our authorized representative.

**OLD REPUBLIC INSURANCE COMPANY**  
133 Oakland Avenue  
Greensburg, Pennsylvania 15601  
A Stock Company

A handwritten signature in black ink, appearing to be "James R. Smith", written in a cursive style.

*Secretary*

A handwritten signature in black ink, reading "Craig R. Smiddy", written in a cursive style.

*President*

J-01 (01/16)



# OLD REPUBLIC INSURANCE COMPANY

## BUSINESS AUTO DECLARATIONS

**POLICY NUMBER**
**Z 35726 40**
**Z 35726 39**
**PREVIOUS POLICY NUMBER \***
**Policyholder Service Office:**

Old Republic Risk Management, Inc.  
445 South Moorland Road, Suite 300  
Brookfield, WI 53005 (877) 797-3400

**Producer: \* #508**

Aon Risk Solutions  
Chicago, IL

**ITEM ONE**

**NAMED INSURED:** Ryder System, Inc. (See Form ORRM 2009)  
**MAILING ADDRESS: \*** 11690 NW 105th Street  
Miami, FL 33178

**POLICY PERIOD: \*** From: 10/01/18 To: 10/01/19 at 12:01 A.M. Standard Time at your mailing address shown above.

**FORM OF BUSINESS: \***

☒ CORPORATION ☐ INDIVIDUAL ☐ LIMITED LIABILITY COMPANY ☒ PARTNERSHIP ☐ OTHER

IN RETURN FOR THE PAYMENT OF THE PREMIUM, AND SUBJECT TO ALL THE TERMS OF THIS POLICY, WE AGREE WITH YOU TO PROVIDE THE INSURANCE AS STATED IN THIS POLICY.

**ITEM TWO**
**SCHEDULE OF COVERAGES AND COVERED AUTOS**

This policy provides only those coverages where a charge is shown in the premium column below. Each of these coverages will apply only to those "autos" shown as covered "autos". "Autos" are shown as covered "autos" for a particular coverage by the entry of one or more of the symbols from the Covered Autos section of the Business Auto Coverage Form next to the name of the coverage.

COVERAGES	COVERED AUTOS	LIMIT	PREMIUM
COVERED AUTOS LIABILITY	1, 14	***See Deductible Endorsement \$ 1,000,000	
PERSONAL INJURY PROTECTION (Or Equivalent No-fault Coverage)	13*	SEPARATELY STATED IN EACH P.I.P. ENDORSEMENT MINUS \$ *** DED.	
ADDED PERSONAL INJURY PROTECTION (Or Equivalent Added No-fault Coverage)		SEPARATELY STATED IN EACH ADDED P.I.P. ENDORSEMENT.	
PROPERTY PROTECTION INSURANCE (Michigan Only)	13*	SEPARATELY STATED IN THE P.P.I. ENDORSEMENT MINUS \$ *** DED. FOR EACH ACCIDENT.	
AUTO MEDICAL PAYMENTS	12	\$ See Form CA 508 012 1011 EACH INSURED	
MEDICAL EXPENSE AND INCOME LOSS BENEFITS (Virginia Only)	12	SEPARATELY STATED IN THE MEDICAL EXPENSE AND INCOME LOSS BENEFITS ENDORSEMENT.	
UNINSURED MOTORISTS	10	\$ See Form CA 508 014 1018	
UNDERINSURED MOTORISTS (When not included in Uninsured Motorists Coverage)	11	\$ See Form CA 508 014 1018	
PHYSICAL DAMAGE COMPREHENSIVE COVERAGE		ACTUAL CASH VALUE OR COST OF REPAIR, WHICHEVER IS LESS, MINUS \$ DED. FOR EACH COVERED AUTO, BUT NO DEDUCTIBLE APPLIES TO LOSS CAUSED BY FIRE OR LIGHTNING. See ITEM FOUR for Hired or Borrowed "Autos".	
PHYSICAL DAMAGE SPECIFIED CAUSES OF LOSS COVERAGE		ACTUAL CASH VALUE OR COST OF REPAIR, WHICHEVER IS LESS, MINUS \$ DED. FOR EACH COVERED AUTO FOR LOSS CAUSED BY MISCHIEF OR VANDALISM. See ITEM FOUR for Hired or Borrowed "Autos".	
PHYSICAL DAMAGE COLLISION COVERAGE		ACTUAL CASH VALUE OR COST OF REPAIR, WHICHEVER IS LESS, MINUS \$ DED. FOR EACH COVERED AUTO. See ITEM FOUR for Hired or Borrowed "Autos".	
PHYSICAL DAMAGE TOWING AND LABOR		\$ For Each Disablement Of A Private Passenger "Auto".	

\*See Form CA 508 010 1011

**PREMIUM FOR ENDORSEMENTS**

MICHIGAN CCA SURCHARGE

ASSESSMENTS, SURCHARGES AND FEES  
Not applicable in Puerto Rico

**\*\*ESTIMATED TOTAL PAYABLE**

Total Shown Is Payable At Inception: \$

\*\* This policy may be subject to final audit.

**AUDIT PERIOD** (if applicable) ☐ ANNUALLY ☐ SEMI-ANNUALLY ☐ QUARTERLY ☐ MONTHLY

**ENDORSEMENTS ATTACHED TO THIS POLICY: =** See Forms Index

**COUNTERSIGNED \*** 10/19/18

(Date)

**BY \***

(Authorized Representative)

\* Entry optional if shown in the Common Policy Declarations.

= Forms and Endorsements applicable to this Coverage Part/policy omitted if shown elsewhere in the policy.

THESE DECLARATIONS AND THE COMMON POLICY DECLARATIONS, IF APPLICABLE, TOGETHER WITH THE COMMON POLICY CONDITIONS, COVERAGE FORM(S) AND FORMS AND ENDORSEMENTS, IF ANY, ISSUED TO FORM A PART THEREOF, COMPLETE THE ABOVE NUMBERED POLICY.

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**Z 35726 40**

**Ryder System, Inc.**

**10/01/2018 - 10/01/2019**

**ORIC00022**

**BUSINESS AUTO DECLARATIONS (Continued)****ITEM THREE  
SCHEDULE OF COVERED AUTOS YOU OWN**

Covered Auto No.	Covered Auto Description						
	Year	Model	Trade Name	Body Type	Serial Number (S)	Vehicle ID Number (VIN)	
1	<b>ON</b>	<b>FILE</b>	<b>WITH</b>	<b>THE</b>	<b>COMPANY</b>		
2							
3							
4							
5							
Covered Auto No.	Purchased				Town And State Where The Covered Auto Will Be Principally Garaged:		
	Original Cost New:	Actual Cost New Or Used:	New	Used			
1			<input type="checkbox"/>	<input type="checkbox"/>			
2			<input type="checkbox"/>	<input type="checkbox"/>			
3			<input type="checkbox"/>	<input type="checkbox"/>			
4			<input type="checkbox"/>	<input type="checkbox"/>			
5			<input type="checkbox"/>	<input type="checkbox"/>			
	Classification						
Covered Auto No.	Radius Of Operation	Business Use s = service r = retail c = commercial	Size GVW, GCW or Vehicle Seating Capacity	Age Group	Secondary Rating Classification	Code	Except For Towing, All Physical Damage Loss Is Payable To You And The Loss Payee Named Below According To Their Interests In The Auto At The Time Of The Loss:
1							
2							
3							
4							
5							
	Coverages-Premiums, Limits And Deductibles (Absence of a deductible or limit entry in any column below means that the limit or deductible entry in the corresponding ITEM TWO column applies instead.)						
	COVERED AUTOS LIABILITY		PERSONAL INJURY PROTECTION		ADDED PERSONAL INJURY PROTECTION		PROPERTY PROTECTION INSURANCE (Michigan Only)
Covered Auto No.	Limit	Premium	Limit Stated In Each P.I.P. Endorsement Minus Deductible	Premium	Limit Stated In Each Added P.I.P. Endorsement	Premium	Limit Stated In P.P.I. Endorsement Minus Deductible
1	<b>STATED</b>	<b>IN</b>	<b>DECLARATIONS</b>		<b>ITEM TWO</b>		
2							
3							
4							
5							
Total Premium							
	Coverages-Premiums, Limits And Deductibles (Absence of a deductible or limit entry in any column below means that the limit or deductible entry in the corresponding ITEM TWO column applies instead.)						
	AUTO MEDICAL PAYMENTS EACH INSURED		MEDICAL EXPENSE AND INCOME LOSS BENEFITS (Virginia Only)				
Covered Auto No.	Limit	Premium	Limit Stated In The Medical Expense And Income Loss Benefits End. For Each Person	Premium			
1	<b>STATED</b>	<b>IN</b>	<b>DECLARATIONS</b>		<b>ITEM TWO</b>		
2							
3							
4							
5							
Total Premium							
	Coverages-Premiums, Limits And Deductibles (Absence of a deductible or limit entry in any column below means that the limit or deductible entry in the corresponding ITEM TWO column applies instead.)						
	COMPREHENSIVE		SPECIFIED CAUSES OF LOSS		COLLISION		TOWING AND LABOR
Covered Auto No.	Limit Stated in ITEM TWO Minus Deductible	Premium	Limit Stated In ITEM TWO Minus Deductible	Premium	Limit Stated In ITEM TWO Minus Deductible	Premium	Limit Per Disablement
1	<b>NOT APPLICABLE</b>						
2							
3							
4							
5							
Total Premium							

**BUSINESS AUTO DECLARATIONS (Continued)****ITEM FOUR****SCHEDULE OF HIRED OR BORROWED COVERED AUTO COVERAGE AND PREMIUMS**

Covered Autos Liability Coverage - Cost Of Hire Rating Basis For Autos Used In Your Motor Carrier Operations (Other Than Mobile Or Farm Equipment)		
Covered Autos Liability Coverage	Estimated Annual Cost Of Hire For All States	Premium
Primary Coverage		Included
Excess Coverage		
Total Hired Auto Premium		Included

For "autos" used in your motor carrier operations, cost of hire means:

1. The total dollar amount of costs you incurred for the hire of automobiles (includes "trailers" and semitrailers), and if not included therein,
2. The total remunerations of all operators and drivers' helpers, of hired automobiles whether hired with a driver by lessor or an "employee" of the lessee, or any other third party, and
3. The total dollar amount of any other costs (e.g., repair, maintenance, fuel, etc.) directly associated with operating the hired automobiles whether such costs are absorbed by the "insured", paid to the lessor or owner, or paid to others.

Covered Autos Liability Coverage - Cost Of Hire Rating Basis For Autos NOT Used In Your Motor Carrier Operations (Other Than Mobile Or Farm Equipment)			
Covered Autos Liability Coverage	State	Estimated Annual Cost Of Hire For Each State	Premium
Primary Coverage			Included
Excess Coverage			
Total Hired Auto Premium			Included

For "autos" **NOT** used in your motor carrier operations, cost of hire means the total amount you incur for the hire of "autos" you don't own (not including "autos" you borrow or rent from your partners or "employees" or their family members). Cost of hire does not include charges for services performed by motor carriers of property or passengers.

Physical Damage Coverages - Cost of Hire Rating Basis For All Autos (Other Than Mobile Or Farm Equipment)				
Coverage	State	Limit Of Insurance	Estimated Annual Cost Of Hire For Each State (Excluding Autos Hired With A Driver)	Premium
Comprehensive		Actual Cash Value Or Cost Of Repair, Whichever Is Less, Minus \$ Deductible For Each Covered Auto, But No Deductible Applies To Loss Caused By Fire Or Lightning.		
Specified Causes Of Loss		Actual Cash Value Or Cost Of Repair, Whichever Is Less, Minus \$ Deductible For Each Covered Auto For Loss Caused By Mischief Or Vandalism.		
Collision		Actual Cash Value Or Cost Of Repair, Whichever Is Less, Minus \$ Deductible For Each Covered Auto.		
Total Hired Auto Premium				

For Physical Damage coverages, cost of hire means the total amount you incur for the hire of "autos" you don't own (not including "autos" you borrow or rent from your partners or "employees" or their family members). Cost of hire does not include charges for any "auto" that is leased, hired, rented or borrowed with a driver.

Cost Of Hire Rating Basis For Mobile Or Farm Equipment - Other Than Physical Damage Coverages					
Coverage	State	Estimated Annual Cost Of Hire For Each State		Premium	
		Mobile Equipment	Farm Equipment	Mobile Equipment	Farm Equipment
Covered Autos Liability - Primary Coverage					
Covered Autos Liability - Excess Coverage					
Personal Injury Protection					
Medical Expense Benefits (Virginia Only)	VA				
Income Loss Benefits (Virginia Only)	VA				
Auto Medical Payments					
Total Hired Auto Premiums					

Cost of hire means the total amount you incur for the hire of "autos" you don't own (not including "autos" you borrow or rent from your partners or "employees" or their family members). Cost of hire does not include charges for services performed by motor carriers of property or passengers.

**BUSINESS AUTO DECLARATIONS (Continued)****ITEM FOUR****SCHEDULE OF HIRED OR BORROWED COVERED AUTO COVERAGE AND PREMIUMS (Continued)**

Cost Of Hire Rating Basis For Mobile Or Farm Equipment - Physical Damage Coverages						
Coverage	State	Limit Of Insurance	Estimated Annual Cost Of Hire For Each State (Excluding Autos Hired With A Driver)		Premium	
			Mobile Equipment	Farm Equipment	Mobile Equipment	Farm Equipment
Comprehensive		Actual Cash Value Or Cost Of Repair, Whichever Is Less, Minus \$ Ded. For Each Covered Auto, But No Deductible Applies To Loss Caused By Fire Or Lightning				
Specified Causes Of Loss		Actual Cash Value Or Cost Of Repair, Whichever Is Less, Minus \$ Ded. For Each Covered Auto For Loss Caused By Mischief Or Vandalism				
Collision		Actual Cash Value Or Cost Of Repair, Whichever Is Less, Minus \$ Ded. For Each Covered Auto				
Total Hired Auto Premiums						

For Physical Damage Coverages, cost of hire means the total amount you incur for the hire of "autos" you don't own (not including "autos" you borrow or rent from your partners or "employees" or their family members). Cost of hire does not include charges for any auto that is leased, hired, rented or borrowed with a driver.

Rental Period Rating Basis For Mobile Or Farm Equipment					
Coverage	Town And State Where The Job Site Is Located	Estimated Number Of Days Equipment Will Be Rented		Premium	
		Mobile Equipment	Farm Equipment	Mobile Equipment	Farm Equipment
Covered Autos Liability - Primary Coverage					
Covered Autos Liability - Excess Coverage					
Personal Injury Protection					
Medical Expense Benefits (Virginia Only)	VA				
Income Loss Benefits (Virginia Only)	VA				
Auto Medical Payments					
Total Hired Auto Premiums					

**ITEM FIVE****SCHEDULE FOR NON-OWNERSHIP COVERED AUTOS LIABILITY INCLUDED IN ITEM TWO, LIABILITY COVERAGE**

Named Insured's Business	Rating Basis	Number	Premium
Other Than Garage Service Operations And Other Than Social Service Agencies	Number Of Employees		<b>INCLUDED</b>
	Number Of Partners (Active And Inactive)		
Garage Service Operations	Number Of Employees Whose Principal Duty Involves The Operation Of Autos		
	Number Of Partners (Active And Inactive)		
Social Service Agencies	Number Of Employees		
	Number Of Volunteers Who Regularly Use Autos To Transport Clients		
	Number Of Partners (Active And Inactive)		
Total Non-ownership Covered Autos Premium			<b>INCLUDED</b>

**BUSINESS AUTO DECLARATIONS (Continued)****ITEM SIX  
SCHEDULE FOR GROSS RECEIPTS OR MILEAGE BASIS**

Address of Business Headquarters Location:

Type Of Risk (Check one):	<input type="checkbox"/> Public Autos	<input type="checkbox"/> Leasing Or Rental Concerns
Rating Basis (Check one):	<input type="checkbox"/> Gross Receipts (Per \$100)	<input type="checkbox"/> Mileage (Per Mile)

Estimated Yearly (Gross Receipts Or Mileage):

Premiums

Covered Autos Liability	
Personal Injury Protection	
Added Personal Injury Protection	
Property Protection Insurance (Michigan Only)	
Auto Medical Payments	
Medical Expense And Income Loss Benefits (Virginia Only)	
Comprehensive	
Specified Causes Of Loss	
Collision	
Towing And Labor	

When used as a premium basis:

**FOR PUBLIC AUTOS**

Gross receipts means the total amount earned by the named insured for transporting passengers, mail and merchandise.

Gross Receipts does not include:

1. Amounts paid to air, sea or land carriers operating under their own permits.
2. Advertising revenue.
3. Taxes collected as a separate item and paid directly to the government.
4. C.O.D. collections for cost of mail or merchandise including collection fees.

Mileage means the total live and dead mileage of all revenue producing "autos" during the policy period.

**FOR RENTAL OR LEASING CONCERNS**

Gross receipts means the total amount earned by the named insured for the leasing or renting of "autos" to others without drivers.

Mileage means the total live and dead mileage of all "autos" you leased or rented to others without drivers.